PTO/SB/17 (10-08)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
						10/591,918-Conf. #5389			
FEE TRANSMITTAL						September 7, 2006			
F	For FY 20	009	ŗ	First Named Inv		Masakazu OKA	AMOTO		
				Examiner Name		T. Trieu			
	 	us. See 37 CFR 1.27		Art Unit		3748			
TOTAL AMOUNT OF F	'AYMENT	(\$) 180.00	!	Attorney Docket No.		4633-0180PUS1			
METHOD OF PAY	MENT (check	all that apply)							
Check Credit Card Money Order Other (please identify):									
x Deposit Account	t Deposit Account N	Number: 02-	-2448	Deposit	Account Nam	ne: Birch, Stewart,	ι, Kolasch <i>ξ</i>	ß Birch, LLP	
For the above	e-identified depc	osit account, the Di	irector is	s hereby authorize	ed to: (che	ck all that apply)		_	
	e fee(s) indicated					idicated below, ex		the filing fee	
X Charge fee(s) u	e any additional fo under 37 CFR 1.1	fee(s) or underpayr .16 and 1.17	ments of	of x Credit	any overpa	ayments			
FEE CALCULATION									
1. BASIC FILING, SE		XAMINATION FEE	ES						
i	· ·	LING FEES		ARCH FEES	EXAMI	NATION FEES			
Application Type	Fee (\$)	Small Entity	E00 (\$	Small Entity		Small Entity		~ 1-1 (6)	
Utility	330	<u>Fee (\$)</u> 165	Fee (\$) 540	<u>Fee (\$)</u> 270	<u>Fee (\$)</u> 220	<u>Fee (\$)</u> 110	rees	Paid (\$)	
Design	220	110	100	50	140	70			
Plant	220	110	330	50 165		70 85			
Reissue	330	165	540		170 650				
Provisional	220	165	540 0	270	650	325			
2. EXCESS CLAIM F		110	U	0	0	0		- " = 414.	
Fee Description	EES						Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (including Reiss	nes)					52	26	
Each independent cla		,					220	110	
Multiple dependent of	•						390	195	
Total Claims	Extra Claims	Fee (\$)	F	ee Paid (\$)	<u>N</u>	/lultiple Depende			
- 20 or	r HP	_ x =			_		ee Paid (_	
HP = highest number of t	total claims paid for,	if greater than 20.						_	
Indep. Claims	Extra Claims		Fe	ee Paid (\$)					
-3 or H		=							
HP = highest number of i		paid for, if greater than	13.						
3. APPLICATION SIZ If the specification a listings under 37	and drawings exc	sceed 100 sheets of the application size	f paper ((excluding electrons is \$270 (\$135 f	onically fil	led sequence or (computer	-0	
sheets or fraction	thereof. See 3.	5 U.S.C. 41(a)(1)(G) and	37 CFR 1.16(s).	OF Silian Ci	IIIIy) IOI Cacii au	altionai J	·O	
Total Sheets	Extra Sheets			dditional 50 or fract	tio <u>n thereo</u>	of Fee (\$)	Fee	Paid (\$)	
10	0 =	/50 =					-		
4. OTHER FEE(S)							Fees	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., lase fil	ing surcharge):	1806 Submission	on of ar	ı Information Di	sclosure	Statement	18	80.00	
SUBMITTED BY	T THE	 							
Signature				Registration No. (Attorney/Agent)	40,439	Telephone	(703) 20)5-8035	
Name (Print/Type) D. Richard Anderson						Date ,	Date January 8, 2010		
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